## FEC FORM 2 STATEMENT OF CANDIDACY

## RECEIVED FEC MAIL CENTER

	2023 JUN -5 AN 9: 15					
1. (a) Name of Candidate (in full)	5050 00M 2 Will 3: 22					
(b) Address (number and street) Check if address changed S29 S. F/A9 lev Nr Z9F	2. FEC Candidate Identification Number					
(c) City, State, and ZIP Gode West Palm Beach FL	3. Is This New Amended Statement (N) OR (A)					
4. Party Affiliation 5. Office Sought 6. State & Dist Floric	rict of Candidate					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE						
7. I hereby designate the following named political committee as my Principal Campaign Committee for the						
(a) Name of Committee (in full)						
Imperato Por president 2024 inc						
(b) Address (number and street)						
S29 S. Flagler DV 29 R (c) City. State, and ZIP Code						
(c) City, State, and ZIP Code						
(c) City, State, and ZIP Code West Palm Beach Florish 3:	3401					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.  NOTE: This designation should be filed with the principal campaign committee.						
(a) Name of Committee (in full)						
(b) Address (number and street)						
,						
(c) City, State, and ZIP Code						
I certify that I have examined this Statement and to the best of my knowledge a	and belief it is true, correct and complete.					
Signature of Candidate	Date					
	01/05/23					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.						
9-00068	FEC FORM 2 (REV. 02/2009)					

FEC Form 2S (Revised 02/2017)

## Optional Supplemental Page for Designation of Additional Authorized Committees

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

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	(a) Name of Committee (in full)					
	(b) Address (number and street)					
	(c) City, State, and ZIP Code					
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. <b>NOTE</b> : This designation should be filed with the principal campaign committee.					
	(a) Name of Committee (in full)					
	(b) Address (number and street)					
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	(b) Address (number and street)					
	(c) City, State, and ZIP Code					

Daniel Imperato 529 S Fisgler Or Apx 29F West Palm Beach, FL 33401

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